



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last) Tsujiura	(First) Rick	(Middle)	TELEPHONE 521-9500
MAILING ADDRESS (Street) 745 Fort Street Mall, 17 th Floor			FAX 541-9050
(City) Honolulu,	(State) Hawaii	(Zip Code) 96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) N/A			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Marriott Vacation Club International		
TELEPHONE (407) 206-6439		
MAILING ADDRESS (Street) 6649 Westwood Boulevard, Suite 500		
FAX (407) 206-6420		
(City) Orlando	(State) Florida	(Zip Code) 32821
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Michael W. Andrew, Jr.		
TELEPHONE (407) 206-6439		
MAILING ADDRESS (Street) 6649 Westwood Boulevard, Suite 500		
FAX (407) 206-6420		
(City) Orlando	(State) Florida	(Zip Code) 32821

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

1/28/05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Michael W. Andrew, Jr.	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Senior Director, Government Affairs
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NAME OF ORGANIZATION (if applicable)
Marriott Vacation Club International

TELEPHONE
(407) 206-6439

MAILING ADDRESS (Street)
6649 Westwood Boulevard, Suite 500

FAX
(407) 206-6420

(City)
Orlando

(State)
Florida

(Zip Code)
32821

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


(Signature of Authorizing Officer or Person Represented)

1/28/05
(Date)